

Please type a plus sign (+) inside the box → ☒

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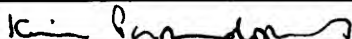
PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| UTILITY PATENT APPLICATION TRANSMITTAL | | Attorney Docket No. 85941.000023 | | | | | | | | | | | | | | | | | |
|--|-----------|---|--|------|--|--|--|---------|--|--|--|------|-------|----------|--|---------|-----------|-----|--|
| (Only for new nonprovisional applications under 37 C.F.R. 1.53(b)) | | First Inventor Furman, Geoffrey Giles | | | | | | | | | | | | | | | | | |
| | | Title CONTROL OF A LIQUID CRYSTAL DISPLAY | | | | | | | | | | | | | | | | | |
| | | Express Mail Label No. EL871340874US | | | | | | | | | | | | | | | | | |
| APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small> | | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 | | | | | | | | | | | | | | | | | |
| <div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</div> <div>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</div> <div>3. <input checked="" type="checkbox"/> Specification [Total Pages 14] (preferred arrangement set forth below)<ul style="list-style-type: none">- Descriptive title of the invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the invention- Brief Summary of the invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of Disclosure</div> <div>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 5]</div> <div>5. Oath or Declaration [Total Pages 2]<div>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</div><div>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d)) (for continuation/divisional with Box 17 completed)<div>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b).</div></div></div> <div>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</div> | | <div>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</div> <div>8. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary)<div>a. <input type="checkbox"/> Computer Readable Copy (CRF)</div><div>b. Specification Sequence Listing on:<div>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</div><div>ii. <input type="checkbox"/> Paper</div></div><div>c. <input type="checkbox"/> Statement verifying identity of above copies</div></div> | | | | | | | | | | | | | | | | | |
| ACCOMPANYING APPLICATION PARTS | | | | | | | | | | | | | | | | | | | |
| <div>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</div> <div>10. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</div> <div>11. <input type="checkbox"/> English Translation Document (if applicable)</div> <div>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</div> <div>13. <input type="checkbox"/> Preliminary Amendment</div> <div>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</div> <div>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</div> <div>16. <input type="checkbox"/> Other: _____</div> | | | | | | | | | | | | | | | | | | | |
| <div>17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:<div><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____</div><div>Prior application information: _____ Examiner: _____ Group/Art Unit: _____</div></div> <div>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</div> | | | | | | | | | | | | | | | | | | | |
| 18. CORRESPONDENCE ADDRESS | | | | | | | | | | | | | | | | | | | |
| <div><input checked="" type="checkbox"/> Customer Number of Bar Code Label <div style="border: 1px dashed black; padding: 5px; text-align: center;">23387 <small>PATENT TRANSMISSION OFFICE</small></div> or <input type="checkbox"/> Correspondence address below</div> <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="4">Name</td></tr><tr><td colspan="4">Address</td></tr><tr><td>City</td><td>State</td><td>Zip Code</td><td></td></tr><tr><td>Country</td><td>Telephone</td><td>Fax</td><td></td></tr></table> | | | | Name | | | | Address | | | | City | State | Zip Code | | Country | Telephone | Fax | |
| Name | | | | | | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | | | | | | | | | | | | | | | | | |
| Country | Telephone | Fax | | | | | | | | | | | | | | | | | |

| | | | |
|-------------------|---|-----------------------------------|-------------------|
| Name (Print/Type) | Kimon Papadopoulos | Registration No. (Attorney/Agent) | 46,480 |
| Signature |  | Date | December 11, 2001 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Complete if Known

Application Number **N/A**
Filing Date **Concurrently herewith**
First Named Inventor **Furman, Geoffrey Giles**
Examiner Name **N/A**
Group Art Unit **N/A**
Attorney Docket Number **85941.000023**

TOTAL AMOUNT OF PAYMENT **\$496.00**

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number **033875**

Deposit Account Name **HARTER, SECREST & EMERY LLP**

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid |
|----------------|-----------------|----------------|-----------------|------------------------|----------|
| 101 | 740 | 201 | 370 | Utility filing fee | \$370.00 |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 510 | 207 | 255 | Plant filing fee | |
| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 114 | 160 | 214 | 80 | Provisional filing fee | |
| SUBTOTAL (1) | | | | | \$370.00 |

2. EXTRA CLAIM FEES

| Total Claims | Extra claims | Fee from below | Fee Paid |
|----------------------|--------------|----------------|----------|
| 13 | -20**= 0 | X 9 | = \$0 |
| Independent Claims 6 | -3 = 3 | X 42 | = \$126 |
| Multiple Dependent | | | |

| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description |
|----------------|-----------------|----------------|-----------------|--|
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 | 42 | ** Reissue independent claim over original patent |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) | | | | 126 |

FEE CALCULATION (check one)

3. ADDITIONAL FEES

| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid |
|---------------------|-----------------|----------------|-----------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 390 | 216 | 195 | Extension for reply within second month | |
| 117 | 890 | 217 | 445 | Extension for reply within third month | |
| 118 | 1,390 | 218 | 695 | Extension for reply within fourth month | |
| 128 | 1,890 | 228 | 945 | Extension for reply within fifth month | |
| 119 | 310 | 219 | 155 | Notice of Appeal | |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | |
| 121 | 270 | 221 | 135 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,240 | 241 | 620 | Petition to revive - unintentional | |
| 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | |
| 143 | 440 | 243 | 220 | Design issue fee | |
| 144 | 600 | 244 | 300 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 710 | 246 | 3655 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |
| Other fee (specify) | | | | | |
| SUBTOTAL (3) | | | | | (\$) |

* Reduced by Basic Filing Fee Paid

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|------------------|-----------------------------------|-------------------|-----------|--------------|
| Name (Print/Type) | Kim Papadopoulos | Registration No. (Attorney/Agent) | 46,480 | Telephone | 716-232-6500 |
| Signature | | Date | December 11, 2001 | | |

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CERTIFICATE OF EXPRESS MAIL UNDER 37 CFR SECTION 1.10

DOCKET NO.: 85941.000023


APPLICANT: Geoffrey Giles Furman

TITLE OF INVENTION: CONTROL OF A LIQUID CRYSTAL DISPLAY

I hereby certify that

Utility Patent Application Transmittal
Fee Transmittal Form (in duplicate) w/check in the amount of \$496.00
9 pages of specifications
4 pages of claims
1 page Abstract
5 sheets of drawings
Declaration w/Power of Attorney
Recordation of Assignment (in duplicate) w/assignment document and Check in the
amount of \$40.00
Return Receipt Postcard

are being deposited with the United States Postal Service "Express Mail Office to Addressee"
service under Express Mail Label #EL871340874US addressed to the Commissioner of Patents,
Box Patent Application, P.O. Box 2327, Arlington, VA 22202, on December 11, 2001


Brenda L. Ricci

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TOTTENHAM